

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------|----------|
| FEE DETERMINATION | A B | 73493 | 12/13/99 |
| O.I.P.E. CLASSIFIER | | 21 | 12/29/99 |
| FORMALITY REVIEW | Q Q | 68971 | 1/19/00 |
| RESPONSE FORMALITY REVIEW | | 59383 | 3/17/00 |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) Canceled A Appeal
 -+ Restricted O Objected

| Claim | Final | Original | Date |
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If more than 150 claims or 10 actions
staple additional sheet here

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